



Dart Aerospace Ltd.  
1270 Aberdeen St  
Hawkesbury, ON  
K6A 1K7  
Canada

Tel (613) 632-5200  
Fax 613 632-5246

**D3910-3**  
**Job Sheet 184540**



Part No: D3910-3

Job Qty: 20 ea

Part Name: Crosstube Lug



Part Weight: 0 lbs

Status: New

Priority: Medium

Job Created: 10/11/18

Job Tracking No:

Due Date: 11/2/18

Created By: Marie Lajeunesse

Type: SOLD

Description:

Note: DWG REV E SHEETS 1,3 IPP REV:A NEW ISSUE 09-11-25 JLM VERIFIED BY:DD IPP REV:B AS PER REV B 10-03-23 JLM VERIFIED BY:DD IPP REV:C 18.02.02 REMOVE FINISH DD VERF:JFS

Ship Via:

### Bill of Materials

### Job Routing

| Op No | Operation  | Qty    | Start Date | Due Date | Standard  |         | Workcenter/Supplier   |                   | Sign-off                       |
|-------|------------|--------|------------|----------|-----------|---------|-----------------------|-------------------|--------------------------------|
|       |            |        |            |          | Setup hrs | Run Hrs | Workcenter / Supplier | Lead Time         |                                |
| 110   | Purchasing | 20 pcs | 11/2/18    | 11/2/18  | 0.00      | 0.00    | Purchasing            |                   | <i>[Signature]</i> OCT 22 2018 |
| 120   | Packaging  | 20 pcs | 11/2/18    | 11/2/18  | 0.00      | 0.00    | Packaging2            |                   | <i>[Signature]</i> OCT 22 2018 |
| 130   | QC         | 20 pcs | 11/2/18    | 11/2/18  | 0.00      | 0.00    | QC6                   |                   | <i>[Signature]</i> OCT 22 2018 |
| 180   | Packaging  | 20 pcs | 11/2/18    | 11/2/18  | 0.00      | 0.00    | Packaging3-2          | 5/523 OCT 30 2018 | <i>[Signature]</i> OCT 22 2018 |
| 190   | QC21-SA    | 20 Ea  | 11/2/18    | 11/2/18  | 0.00      | 0.00    | QC21                  |                   | <i>[Signature]</i> OCT 22 2018 |

Part Op 110 - ISSUE PO TO METEC, NOTE ALODINE AND PAINT AS PER QSI 005  
Descriptions: 120 - Ensure C of C is attach

PO 041329 x 20 OCT 11 2018 *[Signature]* OCT 30 2018

### Job BOM

| Part / Item | Component Name | Quantity            | Operation      | Container |
|-------------|----------------|---------------------|----------------|-----------|
| D2423       | Lug Extrusion  | 2.5000 ft (.125 ea) | 110-Purchasing | 5120061   |
| D3910-3P    | Crosstube Lug  | 20 pcs (1 ea)       | 110-Purchasing | 5120059   |

*M138951 START: 10:05 OUT: 3:20 FINISH: 10:35*

### Job Allocations

| Operation      | Component Part | Required | Inventory | Allocated |
|----------------|----------------|----------|-----------|-----------|
| 110-Purchasing | D2423          | 3        | 263       | 0         |
|                | D3910-3P       | 20       | 0         | 0         |

### Part Specifications

| Spec No | Description   | Target/Tolerance        | Limits         | Type      | Special Comments |
|---------|---------------|-------------------------|----------------|-----------|------------------|
| 1       | Crosstube Lug | 4.450Inches $\pm$ 0.030 | 4.480<br>4.420 |           |                  |
| 2       | Crosstube Lug | 1.380Inches $\pm$ 0.030 | 1.410<br>1.350 |           |                  |
| 3       | Crosstube Lug | 0.080Inches $\pm$ 0.020 | 0.100<br>0.060 | Radius    |                  |
| 4       | Crosstube Lug | 0.270Inches $\pm$ 0.030 | 0.300<br>0.240 | reference |                  |
| 5       | Crosstube Lug | 0.310Inches $\pm$ 0.030 | 0.340<br>0.280 |           |                  |
| 6       | Crosstube Lug | 0.735Inches $\pm$ 0.010 | 0.745<br>0.725 | reference |                  |



DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE



QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                               |                                        |                                     |                                              |                                      |  |  |
|--------------------------------------------------------------|-----------------------------------------------|----------------------------------------|-------------------------------------|----------------------------------------------|--------------------------------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b>                            | <b>AGAINST DEPARTMENT/PROCESS</b>      |                                     |                                              |                                      |  |  |
|                                                              | Rework <input type="checkbox"/>               | Skid-tube <input type="checkbox"/>     | Cross tube <input type="checkbox"/> | Water Jet <input type="checkbox"/>           | Engineering <input type="checkbox"/> |  |  |
|                                                              | Scrap <input type="checkbox"/>                | Machining <input type="checkbox"/>     | Small Fab <input type="checkbox"/>  | Prod. Eng. Coord. <input type="checkbox"/>   | Quality <input type="checkbox"/>     |  |  |
|                                                              | Use-as-is <input type="checkbox"/>            | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/>  | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/>       |  |  |
|                                                              | Suspected Unapproved <input type="checkbox"/> | Large Fab <input type="checkbox"/>     | Composite <input type="checkbox"/>  | Supplier <input type="checkbox"/>            |                                      |  |  |

|              |               |                       |                             |
|--------------|---------------|-----------------------|-----------------------------|
| Date : _____ | Step #: _____ | QTY Effective : _____ | MRB (QSI042) Approval _____ |
|--------------|---------------|-----------------------|-----------------------------|

|                                         |                    |                                                     |
|-----------------------------------------|--------------------|-----------------------------------------------------|
| <b>Description Work Order Deviation</b> | <b>Disposition</b> | <b>Completed By</b>                                 |
|                                         |                    | <b>Lead hand / Supervisor Approval Verification</b> |
|                                         |                    |                                                     |
|                                         |                    | <b>QC / QA Coordinator Approval</b>                 |

|                                             |                                                |                                                 |                                                  |                                           |                                               |  |  |
|---------------------------------------------|------------------------------------------------|-------------------------------------------------|--------------------------------------------------|-------------------------------------------|-----------------------------------------------|--|--|
| <b>Root Cause</b>                           |                                                |                                                 |                                                  | <b>FAULT CATEGORY</b>                     |                                               |  |  |
| Environment <input type="checkbox"/>        | No Re-verification <input type="checkbox"/>    | Pressure/Forced <input type="checkbox"/>        | Temperature/Cure <input type="checkbox"/>        | Power Loss/Surge <input type="checkbox"/> | Positioned Wrong <input type="checkbox"/>     |  |  |
| Design <input type="checkbox"/>             | Operator <input type="checkbox"/>              | Bending <input type="checkbox"/>                | Set-up <input type="checkbox"/>                  | Folio/Program <input type="checkbox"/>    | Outside Dimensions <input type="checkbox"/>   |  |  |
| Doc/Data <input type="checkbox"/>           | Offset/Setup <input type="checkbox"/>          | Centre Not Concentric <input type="checkbox"/>  | BOM/Route <input type="checkbox"/>               | Grain <input type="checkbox"/>            | Over/Under tolerance <input type="checkbox"/> |  |  |
| Equip/Tooling <input type="checkbox"/>      | Supplier <input type="checkbox"/>              | Cracks <input type="checkbox"/>                 | Broken/Damage/Defect <input type="checkbox"/>    |                                           |                                               |  |  |
| Handling/Pre <input type="checkbox"/>       | Training <input type="checkbox"/>              | Crimp/Kink/Ripple/Wave <input type="checkbox"/> | Inspection Incomplete <input type="checkbox"/>   |                                           |                                               |  |  |
| Material <input type="checkbox"/>           | Use for Testing <input type="checkbox"/>       | Cuffs <input type="checkbox"/>                  | Contamination <input type="checkbox"/>           |                                           |                                               |  |  |
| Internal Transport <input type="checkbox"/> | Poor Information <input type="checkbox"/>      | Crushing <input type="checkbox"/>               | Countersink <input type="checkbox"/>             |                                           |                                               |  |  |
| Tribal Knowledge <input type="checkbox"/>   | Rushing <input type="checkbox"/>               | Heat Treat <input type="checkbox"/>             | Cut Too Short <input type="checkbox"/>           |                                           |                                               |  |  |
| LOA <input type="checkbox"/>                | Product Improvement <input type="checkbox"/>   | Wave/Twist in Tube <input type="checkbox"/>     | Instructions Incomplete <input type="checkbox"/> |                                           |                                               |  |  |
| Substation <input type="checkbox"/>         | Process Improvement <input type="checkbox"/>   | Marks/Chatter <input type="checkbox"/>          | Drill Holes <input type="checkbox"/>             |                                           |                                               |  |  |
| Past Expiry Date <input type="checkbox"/>   | Manufacturing Process <input type="checkbox"/> |                                                 |                                                  |                                           |                                               |  |  |
| Misidentified <input type="checkbox"/>      | Past Due <input type="checkbox"/>              | OTHER : _____                                   |                                                  |                                           |                                               |  |  |

Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
CANADA  
TEL: 1 813 632-5200  
Email: sales@dartaero.com  
www.dartaerospace.com

Container No: S120062  
Part: D3910-3  
Job No: 184540  
Serial No/Batch: S120062  
Revision:  
Inspector:  
Exp Date:  
Instructions: Various STCs

DART AEROSPACE

|    |               |                                                              |                  |           |
|----|---------------|--------------------------------------------------------------|------------------|-----------|
| 7  | Crosstube Lug | 1.200Inches $\pm$ 0.030                                      | 1.230<br>1.170   | Radius    |
| 8  | Crosstube Lug | 3.700Inches $\pm$ 0.010                                      | 3.710<br>3.690   |           |
| 9  | Crosstube Lug | 0.375Inches $\pm$ 0.010                                      | 0.385<br>0.365   |           |
| 10 | Crosstube Lug | 0.625Inches $\pm$ 0.010                                      | 0.635<br>0.615   |           |
| 11 | Crosstube Lug | 0.375Inches $\pm$ 0.010                                      | 0.385<br>0.365   |           |
| 12 | Crosstube Lug | 0.340Inches $\pm$ 0.030                                      | 0.370<br>0.310   | Radius    |
| 13 | Crosstube Lug | 0.257Inches $\begin{matrix} + 0.006 \\ - 0.001 \end{matrix}$ | 0.263<br>0.256   | Diameter  |
| 14 | Crosstube Lug | 0.100Inches $\pm$ 0.010                                      | 0.110<br>0.090   |           |
| 15 | Crosstube Lug | 45.000Degrees $\pm$ 0.500                                    | 45.500<br>44.500 | angle     |
| 16 | Crosstube Lug | 1.410Inches $\pm$ 0.030                                      | 1.440<br>1.380   | Reference |

Plex 10/11/18 12:36 PM Dart.lajeunesse.marie



DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

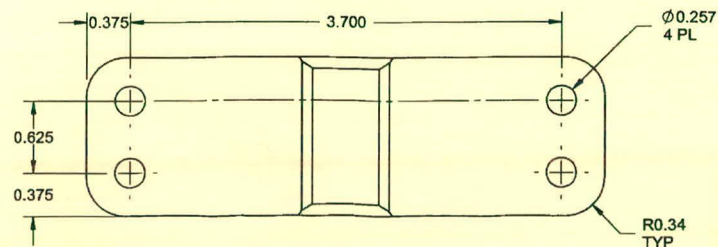
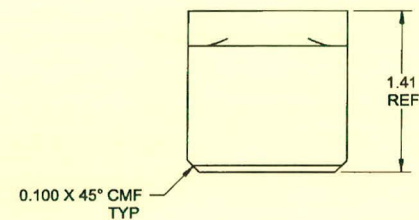
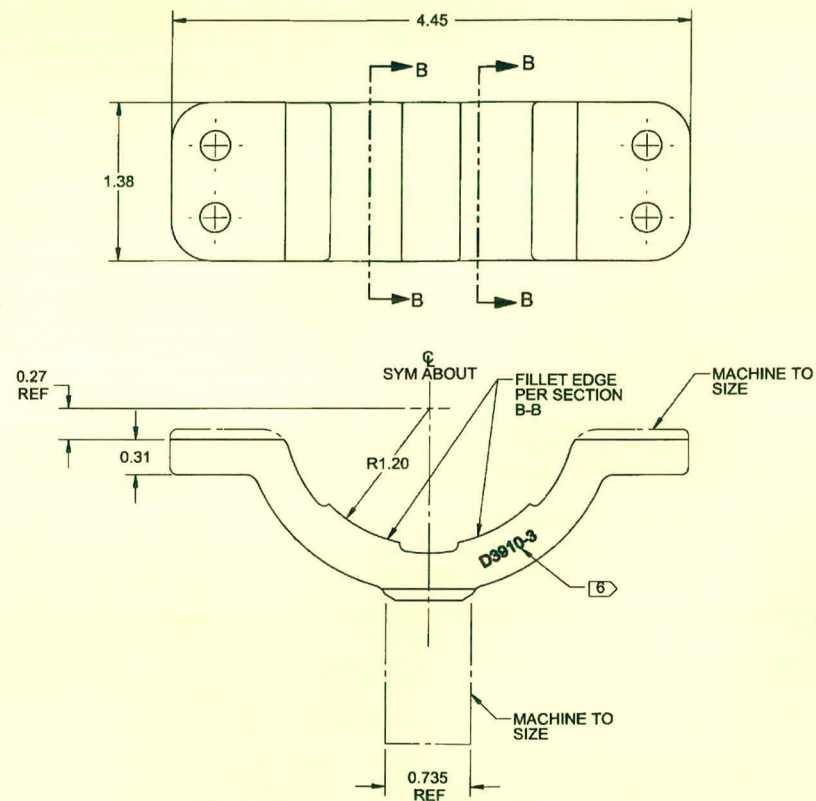
Work Order update only ☐

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                 |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>             Skid-tube <input type="checkbox"/><br/>             Machining <input type="checkbox"/><br/>             Thermoforming <input type="checkbox"/><br/>             Large Fab <input type="checkbox"/> </div> <div>             Cross tube <input type="checkbox"/><br/>             Small Fab <input type="checkbox"/><br/>             Finishing <input type="checkbox"/><br/>             Composite <input type="checkbox"/> </div> <div>             Water Jet <input type="checkbox"/><br/>             Prod. Eng. Coord. <input type="checkbox"/><br/>             Rec/Store/Packaging <input type="checkbox"/><br/>             Supplier <input type="checkbox"/> </div> <div>             Engineering <input type="checkbox"/><br/>             Quality <input type="checkbox"/><br/>             Other <input type="checkbox"/> </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                 |  |
| Date :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Step #:                                                                                                                                                                            | QTY Effective :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | MRB (QSI042) Approval                           |  |
| Description Work Order Deviation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                    | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | Completed By                                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | Lead hand / Supervisor<br>Approval Verification |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | QC / QA Coordinator<br>Approval                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                 |  |
| <b>Root Cause</b><br><div style="display: flex; justify-content: space-between;"> <div>             Environment <input type="checkbox"/><br/>             Design <input type="checkbox"/><br/>             Doc/Data <input type="checkbox"/><br/>             Equip/Tooling <input type="checkbox"/><br/>             Handling/Pre <input type="checkbox"/><br/>             Material <input type="checkbox"/><br/>             Internal Transport <input type="checkbox"/><br/>             Tribal Knowledge <input type="checkbox"/><br/>             LOA <input type="checkbox"/><br/>             Substation <input type="checkbox"/><br/>             Past Expiry Date <input type="checkbox"/><br/>             Misidentified <input type="checkbox"/> </div> <div>             No Re-verification <input type="checkbox"/><br/>             Operator <input type="checkbox"/><br/>             Offset/Setup <input type="checkbox"/><br/>             Supplier <input type="checkbox"/><br/>             Training <input type="checkbox"/><br/>             Use for Testing <input type="checkbox"/><br/>             Poor Information <input type="checkbox"/><br/>             Rushing <input type="checkbox"/><br/>             Product Improvement <input type="checkbox"/><br/>             Process Improvement <input type="checkbox"/><br/>             Manufacturing Process <input type="checkbox"/><br/>             Past Due <input type="checkbox"/> </div> </div> |                                                                                                                                                                                    | <b>FAULT CATEGORY</b><br><div style="display: flex; justify-content: space-between;"> <div>             Pressure/Forced <input type="checkbox"/><br/>             Bending <input type="checkbox"/><br/>             Centre Not Concentric <input type="checkbox"/><br/>             Cracks <input type="checkbox"/><br/>             Crimp/Kink/Ripple/Wave <input type="checkbox"/><br/>             Cuffs <input type="checkbox"/><br/>             Crushing <input type="checkbox"/><br/>             Heat Treat <input type="checkbox"/><br/>             Wave/Twist in Tube <input type="checkbox"/><br/>             Marks/Chatter <input type="checkbox"/> </div> <div>             Temperature/Cure <input type="checkbox"/><br/>             Set-up <input type="checkbox"/><br/>             BOM/Route <input type="checkbox"/><br/>             Broken/Damage/Defect <input type="checkbox"/><br/>             Inspection Incomplete/Unqualified <input type="checkbox"/><br/>             Contamination <input type="checkbox"/><br/>             Countersink <input type="checkbox"/><br/>             Cut Too Short <input type="checkbox"/><br/>             Instructions Incomplete/Unclear <input type="checkbox"/><br/>             Drill Holes <input type="checkbox"/> </div> <div>             Power Loss/Surge <input type="checkbox"/><br/>             Folio/Program <input type="checkbox"/><br/>             Grain <input type="checkbox"/><br/>             Weld <input type="checkbox"/><br/>             Wrong Stock Pulled <input type="checkbox"/><br/>             Out of Sequence <input type="checkbox"/><br/>             Off-set <input type="checkbox"/><br/>             Misabeled <input type="checkbox"/><br/>             Fit/Function <input type="checkbox"/><br/>             Misaligned/off center <input type="checkbox"/> </div> <div>             Positioned Wrong <input type="checkbox"/><br/>             Outside Dimensions <input type="checkbox"/><br/>             Over/Under tolerance <input type="checkbox"/><br/>             Part Incorrect <input type="checkbox"/><br/>             Part Lost/Missing <input type="checkbox"/><br/>             Part Moved <input type="checkbox"/><br/>             Drawing <input type="checkbox"/><br/>             Finish <input type="checkbox"/><br/>             Misread <input type="checkbox"/><br/>             Turning Sequence <input type="checkbox"/> </div> </div> |  |                                                 |  |
| OTHER : <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                 |  |

**SECTION B-B**



ROUND EDGE  
R0.06 MIN - 0.10 MAX  
2 PL



**RELEASED**

2014 JUN 05 97

|            |             |                                                                                                                                                                                                                                |              |
|------------|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN     | AJS         | <b>DART AEROSPACE LTD</b><br>HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                       |              |
| DRAWN      | AJS         |                                                                                                                                                                                                                                |              |
| CHECKED    | [Signature] | DRAWING NO. <b>D3910</b>                                                                                                                                                                                                       | REV. E       |
| MFG. APPR. | [Signature] |                                                                                                                                                                                                                                | SHEET 3 OF 5 |
| APPROVED   | [Signature] | TITLE <b>X-TUBE LUG (350)</b>                                                                                                                                                                                                  | SCALE NTS    |
| DE APPR.   | [Signature] | COPYRIGHT © 2010 BY DART AEROSPACE LTD                                                                                                                                                                                         |              |
| DATE       | 14.05.16    | THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD. |              |







Dart Aerospace Ltd.  
1270 Aberdeen St  
Hawkesbury, ON  
K6A 1K7  
Canada

Tel (613) 632-5200

# **PURCHASE ORDER** **PO041329**

**Supplier:** MEM001-VC  
Metec Metal Technology Inc.  
20 Terry Fox Drive PO Box 781  
Vankleek Hill  
ON  
K0B 1R0 Canada  
Phone: 613 678 3957  
Fax: 613 678 3956

**PO No:** PO041329  
**PO Date:** 10/11/18  
**Due Date:** 10/16/18  
**Purchase Order Revision:**  
**Revision Date:**  
**Ship-To Contact:** Phone:

**Attention:** Walz, Shigi

**Via:** Ground  
**Pymt Terms:** Net 60  
**Freight Terms:**  
**Special Comments:**

**Ship To:** 1270 Aberdeen Street  
Hawkesbury  
ON  
K6A 1K7 Canada  
Phone: 613-632-5200

## **Items**

| Line Item    | Job    | Part     | Supplier Part No | Item No | Description                                                                            | Status | Account | Due Date | Order Quantity | Received Quantity | Balance | Unit Price (CAD) | Extended Price |
|--------------|--------|----------|------------------|---------|----------------------------------------------------------------------------------------|--------|---------|----------|----------------|-------------------|---------|------------------|----------------|
| 1            | 184540 | D3910-3P |                  |         | Crosstube Lug : Various STC's As Per Dwg D3910 Rev. E Alodine and Paint as Per QSI 005 | Firmed | -       | 10/16/18 | 20 pcs         | 0 pcs             | 20 pcs  | \$17.40/pcs      | \$348.00       |
| Grand Total: |        |          |                  |         |                                                                                        |        |         |          |                |                   |         |                  | \$348.00       |

## **Order Notes**

Terms & Condition of Purchasing(Suppliers) and Procurement Quality Clauses are an integral part of our AS9100 requirements. To learn in detail, please visit [www.dartaerospace.com](http://www.dartaerospace.com) for further explanation.

### **Procurement Quality Clauses**

A005 RIGHT OF ENTRY  
A007 FIRST ARTICLE INSPECTION (FAI) BY SELLER, (DOCUMENTATION MAINTAINED BY SUPPLIER)  
A012 CHEMICAL AND PHYSICAL TEST REPORTS  
A016 PERSONNEL QUALIFICATION  
A017 RAW MATERIAL IDENTIFICATION (AS APPLICABLE)  
A026 CERTIFICATION OF MATERIAL CONFORMANCE  
A041 QUALITY MANAGEMENT SYSTEM  
A042 DART NOTIFICATION BY SUPPLIER  
A043 RETENTION OF QUALITY DOCUMENT  
  
A048 COUNTERFEIT PARTS AVOIDANCE, DETECTION, MITIGATION AND DISPOSITION PROGRAM  
A049 SUPPLIER AWARENESS

Plex 10/11/18 3:11 PM dart.Lussier.Patrick





### Packing List

**Bill** Dart Aerospace Ltd.  
**To:** 1270 Aberdeen Street  
 Hawkesbury, ON K6A 1K7  
 Canada

**Ship** Dart Aerospace Ltd.  
**To:** 1270 Aberdeen Street  
 Hawkesbury, ON K6A 1K7  
 Canada

Att. Patrick Lussier

**Shipment No:** 24144  
**Shipment Date:** 17-Oct-2018  
**Ship Via:** Pick up at METEC  
**Order Number:** 3087  
**Order Date:** 10/11/18

**Customer Code:** DART  
**Phone:** (613) 632-9577  
**PO Number:** PO041329 ✓  
**Terms:** Net 60 Days

| ----- Quantity ----- |             |                |            |                 |             |                             |                 |                   |
|----------------------|-------------|----------------|------------|-----------------|-------------|-----------------------------|-----------------|-------------------|
| <u>Item</u>          | <u>Open</u> | <u>Shipped</u> | <u>B/O</u> | <u>Canceled</u> | <u>Unit</u> | <u>Description</u>          | <u>Revision</u> | <u>Job Number</u> |
| 1                    | 20          | 20 ✓           | 0          | 0               | EA          | DART-D3910-3P Crosstube Lug |                 | 3087-01           |

OAS  
38  
7-89

The delivered goods must be inspected upon receipt to confirm compliance. Should there be discrepancies please notify METEC within 30 days of delivery. The goods are otherwise deemed accepted.

Received In Good Order By  
 Att. Patrick Lussier







20 Terry Fox Drive, Vankleek Hill, Ontario K0B 1R0

Tel. (613) 678-3957 & (613) 678-2782 Fax (613) 678-3956 [metec@metec.ca](mailto:metec@metec.ca)

## CERTIFICATE OF CONFORMITY

SOLD TO:

Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, Ont.  
K6A 1K7

SHIPPED TO:

same

| Quantity | Part Number | Part Name     | Dwg Rev.# | Material Batch # | Paint Batch # | P.O. Number |
|----------|-------------|---------------|-----------|------------------|---------------|-------------|
| 20       | D3910-3     | Crosstube Lug | E         | B160522          | Unpainted     | 41329       |

MATERIAL: supplied by DART

DAS  
38  
2-89

We hereby certify that the above parts were made in conformance with applicable drawings.

METEC Metal Technology Inc.

Heather Nixon

Vankleek Hill, October 17, 2018

